

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | DATE | DATE     |
|---------------------------|----------|------|----------|
| FEE DETERMINATION         | T-G      | 32   | 3/19     |
| O.I.P.E. CLASSIFIER       | DM       | 920  | 2/16     |
| FORMALITY REVIEW          | MM       | 835  | 05-24-01 |
| RESPONSE FORMALITY REVIEW | JK       |      | 07/29/01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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